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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name A. Middle name Price Last name and Suffix (Sr., Jr., II, III)	Tammy First name L. Middle name Price Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0510	xxx-xx-0794

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Debtor 1 Tommy A. Price Tammy L. Price

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	672 South Rosehall Lane Round Lake, IL 60073 Number, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code
		Lake County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Del	otor 2 Tan	nmy L. Price				_	Case number (if known)			
Par	t 2: Tell t	he Court About \	Your Bank	runtov Ca	356					
7.	The chapt		Check on	e. (For a l			by 11 U.S.C. § 342(b) for Individuals Filing for I	 Bankruptcy		
	choosing	to file under	Chapter 7							
			☐ Chapt	ter 11						
			☐ Chapt	ter 12						
			☐ Chapt	ter 13						
8.	How you	will pay the fee	abo ord a p	out how your er. If your re-printed	ou may pay. Typically, if you a attorney is submitting your pa address.	re paying the fee ayment on your b	neck with the clerk's office in your local court fo yourself, you may pay with cash, cashier's che ehalf, your attorney may pay with a credit card	eck, or money or check with		
					y the fee in installments. If y ee in Installments (Official Forr		ption, sign and attach the Application for Individual	duals to Pay		
			but app	is not rec dies to yo	uired to, waive your fee, and r ur family size and you are una	may do so only if able to pay the fe	tion only if you are filing for Chapter 7. By law, your income is less than 150% of the official pe in installments). If you choose this option, you fficial Form 103B) and file it with your petition.	overty line that u must fill out		
9.	Have you		■ No.							
	last 8 yea	y within the 's?	☐ Yes.							
	•			District		When	Case number			
				District		When	0 1			
				District		When	Case number			
10.	filed by a not filing	ding or being spouse who is his case with a business	■ No □ Yes.							
	affiliate?	-								
				Debtor			Relationship to you			
				District	-	_ When	Case number, if known			
				Debtor District		When	Relationship to you Case number, if known			
				District		_ *************************************	Oase number, it known			
11.	Do you re		■ No.	Go to	ine 12.					
	residence	?	☐ Yes.	Has yo	our landlord obtained an evicti	on judgment aga	inst you?			
					No. Go to line 12.	_				
					Yes. Fill out <i>Initial Statement</i> this bankruptcy petition.	: About an Eviction	on Judgment Against You (Form 101A) and file	it as part of		

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Debtor 1 Tommy A. Price

Deb	otor 2 Tammy L. Price				Case number (if known)	
Par	Report About Any Bu	sinesses	You Own	as a Sole Proprie	rietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	pusiness	
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	State & ZIP Code	
	it to this petition.		Check	k the appropriate bo	box to describe your business:	
				Health Care Busin	usiness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	eal Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	s defined in 11 U.S.C. § 101(53A))	
				Commodity Broke	oker (as defined in 11 U.S.C. § 101(6))	
				None of the above	ove	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in	dicate that you are ow statement, and f	he court must know whether you are a small business debtor so that it can set appropria are a small business debtor, you must attach your most recent balance sheet, statement and federal income tax return or if any of these documents do not exist, follow the procedu	of
	For a definition of small	■ No.	I am n	not filing under Char	hapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		ter 11, but I am NOT a small business debtor according to the definition in the Bankrupto	;у
		☐ Yes.	I am fi	lling under Chapter	ter 11 and I am a small business debtor according to the definition in the Bankruptcy Cod	.et
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	Any Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to public health or safety?		What is t	the hazard?		
	Or do you own any property that needs			liate attention is why is it needed?	2	
	immediate attention?		nocu c u,	why is it liecueu!	•	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
	а.дон. горино:				Number, Street, City, State & Zip Code	

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Debtor 1 Tommy A. Price

Debtor 2 Tammy L. Price Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-26251 Doc 1 Filed 09/18/18 Entered 09/18/18 14:54:49 Desc Main Document Page 6 of 60

	otor 2 Tammy L. Price				Case nu	ımber (if known)		
Par	t 6: Answer These Questi	ions for Repo	orting Purposes					
	What kind of debts do you have?		re your debts primarily consundividual primarily for a personal,			defined in 11 U.S.C	c. § 101(8) as "incurred by an	
			No. Go to line 16b.					
			Yes. Go to line 17.					
			re your debts primarily busines oney for a business or investmen					
			No. Go to line 16c.					
			Yes. Go to line 17.					
		16c. St	ate the type of debts you owe the	at are not consum	ner debts or bus	siness debts		
17.	Are you filing under Chapter 7?	□ No. I a	nm not filing under Chapter 7. Go	o to line 18.				
Do you estimate that after any exempt property is excluded a administrative expens		ar	nm filing under Chapter 7. Do you e paid that funds will be available				and administrative expenses	
	are paid that funds will be available for distribution to unsecured creditors?		No Yes					
18.	How many Creditors do you estimate that you	■ 1-49		☐ 1,000-5,000 ☐ 5001-10,000		☐ 25,001 ☐ 50,001		
	owe?	☐ 50-99 ☐ 100-199 ☐ 200-999		10,001-25,00			han100,000	
19.	How much do you	□ \$0 - \$50,	000	□ \$1,000,001 -	\$10 million	□ \$500,0	000,001 - \$1 billion	
	estimate your assets to be worth?	\$50,001		\$10,000,001			0,000,001 - \$10 billion	
		■ \$100,001 □ \$500,001	• •	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million			00,000,001 - \$50 billion han \$50 billion	
20.	How much do you	□ \$0 - \$50,	000	□ \$1,000,001 -	\$10 million	□ \$500,0	000,001 - \$1 billion	
	estimate your liabilities to be?	\$50,001		\$10,000,001			0,000,001 - \$10 billion	
		■ \$100,001 □ \$500,001	- \$500,000 - \$1 million	□ \$50,000,001 □ \$100,000,000			00,000,001 - \$50 billion than \$50 billion	
Par	t7: Sign Below							
For	you	I have exam	ined this petition, and I declare u	under penalty of po	erjury that the in	nformation provided	is true and correct.	
			sen to file under Chapter 7, I am s Code. I understand the relief a					
			y represents me and I did not pa have obtained and read the noti				help me fill out this	
		I request reli	ef in accordance with the chapte	er of title 11, Unite	d States Code,	specified in this pet	ition.	
			making a false statement, conc case can result in fines up to \$25					
		/s/ Tommy			/s/ Tammy L			
		Tommy A. Signature of			Tammy L. Pi Signature of De			
		Executed on	September 18, 2018		Executed on	September 18, 2	2018	
			MM / DD / YYYY		-	MM / DD / YYYY		

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Debtor 1	Tommy A. Price	Document	Page 7 of 60		
Debtor 2	Tammy L. Price		Ca	se number (if known)	
For your a represente	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify the person is eligible.	ed States Code, and have	explained the relief ava	ailable under each chapter
	not represented by ey, you do not need page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no know	wledge after an inquiry	that the information in the
		/s/ James T. Magee	Date	September 18, 2	018
		Signature of Attorney for Debtor		MM / DD / YYYY	
		James T. Magee 1729446			
		Printed name			
		Magee Hartman, P.C.			
		Firm name			

Email address

bk@mageehartman.com

444 North Cedar Lake Road Round Lake, IL 60073 Number, Street, City, State & ZIP Code

Contact phone (847) 546-0055

1729446 ILBar number & State

Fill in this information to identify your case:
Debtor 1 Tommy A. Price
First Name Middle Name Last Name
Debtor 2 Tammy L. Price
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
Case number
(if known)

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	145,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	30,310.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	175,310.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	142,333.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	179,131.39
	Your total liabilities	\$	321,464.39
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,701.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,666.69
Paı	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

		Document	Page 9 of 60	
	Tommy A. Price		9	
Debtor 2	Tammy L. Price		Case number (if known)	

8. From the <i>Statement of Your Current Monthly Income</i> : Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$	8,326.00
---	----	----------

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Cas	e 18-2025.	I DOC'I I		ument	Page 10 of 60	14.54.48) Des	oc ivialii
-ill	in this informa	tion to identify	your case and th			T MM. TO OF OO			
Deb	tor 1	Tommy A. P	rice						
500		First Name		Name		Last Name			
	tor 2	Tammy L. Pi		Nome		Last Name			
	use, if filing)		Middle						
Jnit	ed States Bank	ruptcy Court for	the: NORTHER	N DIST	RICT OF ILLIN	NOIS			
Cas	e number					_			☐ Check if this is ar
									amended filing
Off	ficial Forn	<u>m 106A/E</u>	<u> </u>						
3 C	hedule	A/B: Pi	operty						12/15
nink nforr	it fits best. Be a mation. If more s ver every question	as complete and a space is needed, a on.	accurate as possibl attach a separate sh	e. If two neet to th	married people his form. On the	in asset fits in more than one of are filing together, both are e e top of any additional pages,	qually respons	ible for sup	plying correct
_	No. Go to Part 2 Yes. Where is the								
1.1	070 0 4 - 5) h - H I		What	is the property	? Check all that apply			
		Rosehall Lane available, or other des			Single-family h				ms or exemptions. Put claims on Schedule D:
	,	Officer address, if available, of other description			Duplex or mult	or cooperative			is Secured by Property.
	Round Lake	e IL	60073-0000			or mobile home	Current value entire property		Current value of the portion you own?
	City	State	ZIP Code		Investment pro	pperty	\$145,0	00.00	\$145,000.00
					Timeshare Other			imple, tena	our ownership interest ncy by the entireties, or
				Who	Debtor 1 only	in the property? Check one	Joint Tenai		
	Lake				-				
	County				Debtor 1 and [Debtor 2 only	Chaak if t	hia ia aamu	i4
					At least one of	the debtors and another	(see instruct		nunity property
					r information your property identification	ou wish to add about this item on number:	, such as local		
						rom Part 1, including any e			\$145,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Debto	or 2 <u>T</u>	ammy L. Pr	rice		Case number (if known)			
	,	trucks, tract	ors, sport utility ve	hicles, motorcycles				
□ ·								
	162							
3.1	Make:	Ford		Who has an interest in the property? Check one	Do not deduct secured claims or exemptions. P the amount of any secured claims on Schedule			
	Model:	Fusion		☐ Debtor 1 only		Claims Secured by Property.		
	Year:	2013		Debtor 2 only	Current value of the	Current value of the		
	Approxin	nate mileage:	85,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?		
	Other inf	formation:		\square At least one of the debtors and another				
				☐ Check if this is community property (see instructions)	\$6,000.00	\$6,000.0		
3.2	Make:	Ford		Who has an interest in the property? Check one	Do not deduct secured	I claims or exemptions. Put		
J.Z	Model:	Escape		Debtor 1 only		ured claims on Schedule D: Claims Secured by Property.		
	Year:	2018		Debtor 2 only				
		nate mileage:	6,500	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?		
		formation:		☐ At least one of the debtors and another		F,		
	Leased	d Vehicle		☐ Check if this is community property (see instructions)	\$17,000.00	\$17,000.0		
				(,	B			
3.3	Make:	Ford		Who has an interest in the property? Check one	the amount of any sec	d claims or exemptions. Put ured claims on <i>Schedule D:</i>		
	Model:	Fiesta		Debtor 1 only	Creditors Who Have C	Claims Secured by Property.		
	Year:	2015	CE 000	Debtor 2 only	Current value of the	Current value of the		
		nate mileage:	65,000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?		
	Other int	formation:		At least one of the debtors and another				
				☐ Check if this is community property (see instructions)	\$4,500.00	\$4,500.0		
Exa	amples: B No Yes Id the do	oats, trailers,	motors, personal wa	d other recreational vehicles, other vehicles tercraft, fishing vessels, snowmobiles, motorcy n for all of your entries from Part 2, including that number here	rcle accessories	\$27,500.00		
art 3	Descri	he Your Person	nal and Household Ite	ems				
				terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
Ex	<i>amples:</i> No	goods and for Major appliant escribe	urnishings ces, furniture, linens,	, china, kitchenware		·		
			Couch, Chairs a	and Livingroom Furniture		\$300.0		
			Television Lam	ps and Bedroom Set		\$500.0		
			relevision, Lam	אים מווע שפעוטטווו טכנ		Ψ500.0		

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	Debtor 1 Tommy A. Tammy L. F		Case number (if known)	
		Washer, Dryer and Diningroom Set		\$300.00
		Kitchen Utensils, Kitchen Table and Chairs		\$160.00
		Stove, Refrigerator, Dishwasher and Microwave		\$300.00
7.		and radios; audio, video, stereo, and digital equipment; compute ell phones, cameras, media players, games	rs, printers, scanners; music colle	ctions; electronic devices
8.		d figurines; paintings, prints, or other artwork; books, pictures, or tions, memorabilia, collectibles	other art objects; stamp, coin, or	baseball card collections;
		Minor Baseball Card Collection		\$150.00
10	musical inst ■ No □ Yes. Describe D. Firearms Examples: Pistols, rifle ■ No □ Yes. Describe 1. Clothes	tographic, exercise, and other hobby equipment; bicycles, pool ta	ıbles, golf clubs, skis; canoes and	kayaks; carpentry tools;
12	2. Jewelry Examples: Everyday j □ No ■ Yes. Describe	ewelry, costume jewelry, engagement rings, wedding rings, heirld	oom jewelry, watches, gems, gold	
_		Jewelry		\$50.00
	3. Non-farm animals Examples: Dogs, cats No Yes. Describe		ealth aids you did not list	
14	 Any other personal a No Yes. Give specific ir 	nd household items you did not already list, including any h	eaiui aius you did not list	
	 	Lawn Mower, Leaf Blower and Hand Tools		\$150.00

Case 18-26251 Doc 1 Filed 09/18/18 Entered 09/18/18 14:54:49 Desc Main Document Page 13 of 60 Tommy A. Price Debtor 1 Tammy L. Price Case number (if known) Debtor 2 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,310.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$0.00 **Chase Bank** Checking #4731 **PNC Bank** \$500.00 17.2. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No

Institution name or individual: ☐ Yes.

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

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		Case 18	9-20231	DOC 1	Documer			eu 09/18/18 14 of 60	5 14.54.49	Desc ivi	alli
	ebtor 1 ebtor 2	Tommy A. Tammy L.			Documen		raye		number (if known)		
	26 U.S.C ■ No	c. §§ 530(b)(1), 529A(b), ar	d 529(b)(1).							
	☐ Yes		Institution na	me and descr	iption. Separately	y file the	e records o	of any interests.1	1 U.S.C. § 521(c):		
25	■ No		future interesting		ty (other than a	nything	listed in	line 1), and righ	ts or powers exer	cisable for	your benefit
26					s, and other inte	ellectua	al propert	v			
	Example ■ No	les: Internet d	omain names	, websites, pr	oceeds from roya						
	☐ Yes. (Give specific	information at	oout them							
27	Example ■ No	les: Building p	s, and other of the second sec	sive licenses,		ociation	holdings,	liquor licenses, p	rofessional license	S	
M		roperty owe								Curren	t value of the
	oney or p	roperty one	a to you.							portion Do not	you own? deduct secured or exemptions.
28	Tax refu ■ No	ınds owed to	you								
		Give specific i	nformation ab	out them, incl	luding whether yo	ou alrea	idy filed th	e returns and the	tax years		
29	Family s		or lump sum a	alimony, spou	sal support, child	d suppoi	rt, mainter	nance, divorce se	ttlement, property s	 settlement	
	■ No		nformation					·			
30	Exampl	<i>les:</i> Unpaid w		y insurance p	ayments, disabili someone else	ity bene	fits, sick p	eay, vacation pay,	workers' compens	sation, Socia	al Security
	■ No □ Yes.	Give specific	information								
31		s in insurand		insurance: h	ealth savings acc	count (H	ISA): cred	lit. homeowner's.	or renter's insuranc	ce.	
	■ No	, , , , , , , , , , , , , , , , , , , ,	,,	,		(**	,,,	,		-	
	☐ Yes. N	Name the insu		ny of each po pany name:	licy and list its va	alue.		Beneficiary:		Surrer value:	nder or refund
32	If you a				someone who h proceeds from a			olicy, or are currer	ntly entitled to recei	ve property	because
	■ No □ Yes.	Give specific	information								
33					rou have filed a l urance claims, or			a demand for pa	ayment		
	■ No	Describe eac	h claim								
34				ed claims of	every nature inc	cludina	l COUNTER	claims of the deb	otor and rights to	set off clain	ns
57	■ No	yoni an	a.mqalaatt	0.0	o.o., nataro, m	uuiiig	, sounter t	or the det	and rights to	Jac Jii Gialli	·· ·
	☐ Yes. I	Describe eac	h claim								

Case 18-26251 Doc 1 Filed 09/18/18 Entered 09/18/18 14:54:49 Desc Main Page 15 of 60 Document Tommy A. Price Debtor 1 Debtor 2 Tammy L. Price Case number (if known) 35. Any financial assets you did not already list ■ No $\hfill \square$ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$500.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$145,000.00 56. Part 2: Total vehicles, line 5 \$27,500.00 Part 3: Total personal and household items, line 15 57. \$2,310.00 Part 4: Total financial assets, line 36 \$500.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$30.310.00 Copy personal property total \$30,310.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$175,310.00

Official Form 106A/B Schedule A/B: Property page 6

		17(1,111)		
Fill in this infor	mation to identify your	case:		
Debtor 1	Tommy A. Price			
	First Name	Middle Name	Last Name	
Debtor 2	Tammy L. Price			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is a amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Id	entify the	Property	/ You C	Claim as	Exemp	١t
------------	------------	----------	---------	----------	-------	----

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
672 South Rosehall Lane Round Lake, IL 60073 Lake County	\$145,000.00		\$30,000.00	735 ILCS 5/12-901	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
2013 Ford Fusion 85,000 miles Line from Schedule A/B: 3.1	\$6,000.00		\$2,400.00	735 ILCS 5/12-1001(c)	
Line nom ochedale AVD. G.1			100% of fair market value, up to any applicable statutory limit		
2018 Ford Escape 6,500 miles Leased Vehicle	\$17,000.00		\$0.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit		
2015 Ford Fiesta 65,000 miles	\$4,500.00		\$2,400.00	735 ILCS 5/12-1001(c)	
Ellie Holli Geriedale AVB. G.G			100% of fair market value, up to any applicable statutory limit		
Couch, Chairs and Livingroom	\$300.00		\$300.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		

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Debtor 1 Tammy L. Price Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Television, Lamps and Bedroom Set 735 ILCS 5/12-1001(b) \$500.00 \$500.00 Line from Schedule A/B: 6.2 100% of fair market value, up to any applicable statutory limit Washer, Dryer and Diningroom Set 735 ILCS 5/12-1001(b) \$300.00 \$300.00 Line from Schedule A/B: 6.3 100% of fair market value, up to any applicable statutory limit Kitchen Utensils, Kitchen Table and 735 ILCS 5/12-1001(b) \$160.00 \$160.00 Chairs Line from Schedule A/B: 6.4 П 100% of fair market value, up to any applicable statutory limit Stove, Refrigerator, Dishwasher and 735 ILCS 5/12-1001(b) \$300.00 \$300.00 **Microwave** Line from Schedule A/B: 6.5 100% of fair market value, up to any applicable statutory limit **Minor Baseball Card Collection** 735 ILCS 5/12-1001(b) \$150.00 \$150.00 Line from Schedule A/B: 8.1 100% of fair market value, up to any applicable statutory limit **Wearing Apparel** 735 ILCS 5/12-1001(a) \$400.00 \$400.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Jewelry 735 ILCS 5/12-1001(b) \$50.00 \$50.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Lawn Mower, Leaf Blower and Hand 735 ILCS 5/12-1001(b) \$150.00 \$150.00 Tools Line from Schedule A/B: 14.1 100% of fair market value, up to any applicable statutory limit Checking #4731: Chase Bank 735 ILCS 5/12-1001(b) \$0.00 \$0.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Checking: PNC Bank 735 ILCS 5/12-1001(b) \$500.00 \$500.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No П

Yes

Tommy A. Price

		Document Page	18 of 60		
Fill in this	s information to identify you	r case:			
Debtor 1	Tommy A. Price				
	First Name	Middle Name Last Name)		
Debtor 2 (Spouse if, fili	Tammy L. Price	Middle Name Last Name	<u> </u>		
	3,		•		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS			
Case num	nber				
(if known)				_	if this is an
				ameno	led filing
Official	Form 106D				
		Who Hove Claims Soon	ed by Droport		40/45
sched	ule D: Creditors	Who Have Claims Secur	red by Propert	<u>y </u>	12/15
	copy the Additional Page, fill it o	f two married people are filing together, both ar out, number the entries, and attach it to this forn			
•	reditors have claims secured by	vour property?			
	•	nis form to the court with your other schedule	s. You have nothing else to	n report on this form	
_		•	3. Tou have nothing cise to	o report on this form.	
	s. Fill in all of the information I	Delow.			
Part 1:	List All Secured Claims		. Column A	Column B	Column C
		nore than one secured claim, list the creditor separa a particular claim, list the other creditors in Part 2.	ately	Value of collateral	Unsecured
		cal order according to the creditor's name.	Do not deduct the	that supports this	portion
2.1 Fiftl	h Third Bank	Describe the property that secures the claim:	value of collateral. \$105,527.00	s145,000.00	If any \$0.00
	tor's Name	672 South Rosehall Lane Round		<u> </u>	
Ban	kruptcy Department	Lake, IL 60073 Lake County			
	Idrop RSCB3E/1830 E	As of the date you file, the claim is: Check all that	 t		
	is Ave SE nd Rapids, MI 49546	apply.	•		
	per, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Numb	ior, otreet, only, otate a zip oode	☐ Disputed			
Who owes	s the debt? Check one.	Nature of lien. Check all that apply.			
Debtor '	1 only	An agreement you made (such as mortgage o	r secured		
Debtor 2	2 only	car loan)			
	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	٦)		
_	one of the debtors and another	☐ Judgment lien from a lawsuit			
	if this claim relates to a unity debt	Other (including a right to offset)			
	•				
Date debt v	was incurred	Last 4 digits of account number 419	93		
Line	coln Automotive				
22	ancial	Describe the property that secures the claim:	\$17,385.00	\$17,000.00	\$385.00
	tor's Name	2018 Ford Escape 6,500 miles	1		
		Leased Vehicle			
	n: Bankruptcy	As of the date you file, the claim is: Check all tha	l t		
). Box 542000 aha, NE 68154	apply.			
	per, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Numb	er, Street, City, State & Zip Code	☐ Disputed			
Who owes	s the debt? Check one.	Nature of lien. Check all that apply.			
Debtor ?	1 only	An agreement you made (such as mortgage o	r secured		
☐ Debtor 2	2 only	car loan)			
■ Debtor	1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien	n)		
_	one of the debtors and another	Judgment lien from a lawsuit			
	if this claim relates to a unity debt	Other (including a right to offset)			

Official Form 106D

Date debt was incurred

8399

Last 4 digits of account number

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Debto	r 1 Tommy A. Price				Case	number (if know)		
	First Name	Middle Na	ame Last Name					
Debto	r 2 Tammy L. Price							
	First Name	Middle Na	ame Last Name					
') '2	Lincoln Automotive Financial		Describe the property that secures the cl	aim:		\$10,992.00	\$6,000.00	\$4,992.00
	Creditor's Name		2013 Ford Fusion 85,000 miles	aiiii.			40,000.00	Ψ 1,002.00
	oround or runno		2013 Ford Fusion 65,000 filles					
	Attn: Bankruptcy							
	P. O. Box 542000		As of the date you file, the claim is: Check apply.	all that				
(Omaha, NE 68154		Contingent					
N	Number, Street, City, State & Zip (Code	☐ Unliquidated					
			☐ Disputed					
Who o	owes the debt? Check one		Nature of lien. Check all that apply.					
_	otor 1 only otor 2 only		An agreement you made (such as mortg car loan)	age or s	secured			
_	otor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic	c's lien)				
_	east one of the debtors and	anothor	☐ Judgment lien from a lawsuit	,				
_	eck if this claim relates to a		☐ Other (including a right to offset)					
	mmunity debt	•	— Cirier (including a right to onset)					
Date de	ebt was incurred		Last 4 digits of account number	8891				
741	Lincoln Automotive					¢0.400.00	¢4 500 00	£2,020,00
F	Financial		Describe the property that secures the cl	aim:		\$8,429.00	\$4,500.00	\$3,929.00
C	Creditor's Name		2015 Ford Fiesta 65,000 miles					
	Attn. Bankruntav							
	Attn: Bankruptcy P. O. Box 542000		As of the date you file, the claim is: Check	all that				
	Omaha, NE 68154		apply.					
_	Number, Street, City, State & Zip (Codo	☐ Contingent ☐ Unliquidated					
,	vulliber, Street, City, State & Zip v	Code	☐ Disputed					
Who o	wes the debt? Check one	_	Nature of lien. Check all that apply.					
□ Deb	otor 1 only		_					
	otor 2 only		 An agreement you made (such as mortg car loan) 	age or s	securea			
_	otor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic	c's lien)				
_	east one of the debtors and a	41		0 0 11011,				
	east one of the debtors and a eck if this claim relates to a		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)					
	mmunity debt	a	Unler (including a right to driset)					
	•							
Date d	ebt was incurred		Last 4 digits of account number	7415	5			
						4440 000 00		
	-		olumn A on this page. Write that number h the dollar value totals from all pages.	ere:	-	\$142,333.00		
	s is the last page of your it	orin, add	the donar value totals from all pages.			\$142,333.00		
	- 11.60 - 5 - 5		5 1. T		-			
Part 2	List Others to Be No	tified fo	r a Debt That You Already Listed					
			e notified about your bankruptcy for a deb					
			we to someone else, list the creditor in Par you listed in Part 1, list the additional cred					
	in Part 1, do not fill out or s							
	Name, Number, Street, City,	, State & Z	Zip Code	On wh	hich line i	n Part 1 did you enter the	creditor? 2.4	
	Ford Credit P. O. Box 790093			1 4	4 aliait- 1	account num-t		
	P. U. DUX /90093	70_000		∟ast 4	ugits of	account number		

			Do	cument	Page 2	0 of 60		
Fill in	this inforn	nation to identify your	case:					
Debto	or 1	Tommy A. Price						
_ 0.0		First Name	Middle Name		Last Name			
Debto	or 2	Tammy L. Price						
(Spous	e if, filing)	First Name	Middle Name		Last Name			
Unite	d States Ba	nkruptcy Court for the:	NORTHERN DIS	STRICT OF ILL	INOIS			
Case (if know	number _							Check if this is an amended filing
		<u>106E/F</u> /F: Creditors W	/ho Have Ur	nsecured	Claims			12/15
ny ex sched sched eft. At ame a	ecutory cont ule G: Execu ule D: Credito tach the Con and case nun	racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec tinuation Page to this pag nber (if known).	that could result in pired Leases (Officia sured by Property. If ge. If you have no in	a claim. Also lis I Form 106G). Do more space is n	st executory on onot include leeded, copy	contracts on Schedu any creditors with p the Part you need, fi	lle A/B: Property (Offic artially secured claim Il it out, number the e	s that are listed in ntries in the boxes on the
Part 1		Il of Your PRIORITY Ur		2				-
		ors have priority unsecure	d ciains against yo	u ?				
	No. Go to P	art 2.						
	Yes.			_				
Part 2	List A	I of Your NONPRIORIT	Y Unsecured Cla	ims				
3. D	o any credito	ors have nonpriority unse	cured claims agains	t you?				
	No. You hav	ve nothing to report in this p	art. Submit this form	to the court with y	our other sche	edules.		
	Yes.							
_	■ Yes.							
ur th	nsecured clair	nonpriority unsecured cl m, list the creditor separatel or holds a particular claim, l	y for each claim. For	each claim listed,	identify what t	type of claim it is. Do r	not list claims already in	ncluded in Part 1. If more
	uit Z.							Total claim
4.1	ACL, In	•	Last	t 4 digits of acco	unt numbor	7891		\$393.00
7.1		Creditor's Name	Las	t 4 digits of acce	ount number	7031		φ393.00
	' '	s Collection Service	, Inc. Whe	en was the debt	incurred?			
		19225 Clinton Drive						_
		town, WI 53022			9. 4			
		treet City State Zlp Code rred the debt? Check one.	AS C	or the date you fi	lie, the claim	is: Check all that appl	y	
	Debtor			_				
		•		Contingent				
	Debtor	•		Jnliquidated				
	_	1 and Debtor 2 only	_	Disputed				
		t one of the debtors and an	O(1101	e of NONPRIORI	I Y unsecure	a ciaim:		
	☐ Check debt	if this claim is for a com	inunity	Student loans			r and a rest	
		m subject to offset?		Obligations arisino ort as priority clain		aration agreement or c	divorce that you did not	
	■ No	•		. ,		ng plans, and other sin	nilar debts	
	□ Yes			Other. Specify	•	01		
	— 163		- (Julei. Specify _				_

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Debtor 1 Tommy A. Price

Debto	Tammy L. Price	Case number (if know)					
4.2	Anesthesia Consultants, Ltd. Nonpriority Creditor's Name	Last 4 digits of account number 0501	\$1,976.00				
	34121 Eagle Way Chicago, IL 60678-1341	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Balance on Account					
4.3	Ashley Home Store	Last 4 digits of account number 1748	\$1,200.00				
	Nonpriority Creditor's Name 551 North Milwaukee Avenue Vernon Hills, IL 60061	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	☐ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	□ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Balance on Account					
		Other. Specify					
4.4	Capital One	Last 4 digits of account number 9933	\$10,163.00				
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?					
	P. O. Box 30285						
	Salt Lake City, UT 84130						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Balance on Account					

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	Tommy A. Price Tammy L. Price	Cas	se number (if know)	
4.5	Capital One	Last 4 digits of account number 24	38	\$2,487.00
	Nonpriority Creditor's Name Attn: Bankruptcy P. O. Box 30285	When was the debt incurred?		. ,
_	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Cl	neck all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	im:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation report as priority claims	n agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing pla	ns, and other similar debts	
	□ Yes	Other. Specify Balance on Ac	count	
	Capital One Bank USA, N.A. Nonpriority Creditor's Name	Last 4 digits of account number 33	90	\$3,201.00
	c/o Portfolio Recovery P. O. Box 41021 Norfolk, VA 23541	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Cl	neck all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	im:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation report as priority claims		
	■ No	Debts to pension or profit-sharing pla	ns, and other similar debts	
	☐ Yes	Other. Specify Balance on Ac	count	
	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number 83	374	\$4,065.00
	Correspondence Department P. O. Box 15298	When was the debt incurred?		
	Wilmington, DE 19850 Number Street City State Zlp Code	As of the date you file, the claim is: Cl	anak all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Of	теск ан тнаг арргу	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only			
	At least one of the debtors and another	Type of NONPRIORITY unsecured clai	im:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation report as priority claims	n agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing pla	ns, and other similar debts	
	☐ Yes	Other. Specify Balance on Ac	count	

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	Tommy A. Price Tammy L. Price	Case number (if know)	
4.8	Citibank/Distressed Asset Portfolio	Last 4 digits of account number 4955	\$2,353.41
	Nonpriority Creditor's Name c/o Unifund CCR, LLC 10625 Techwoods Circle Cincinnati, OH 45242	When was the debt incurred?	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Balance on Account	
4.9	Citizens Bank	Last 4 digits of account number 6553	\$12,079.00
	Nonpriority Creditor's Name Attention: ROP-15B 1 Citizens Drive Riverside, RI 02940	When was the debt incurred?	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.1	Comenity Capital Bank/Bill Me Later	Last 4 digits of account number 2654	\$2,142.10
	Nonpriority Creditor's Name c/o Simm Associates, Inc. 800 Pencader Drive Newark, DE 19702	When was the debt incurred?	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Balance on Account	
	55	- Outer, openity	

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	Tommy A. Price Tammy L. Price	Case number (if know)	
7.1	Comm Cons School Dist. 46 Registrar	Last 4 digits of account number 5625	\$250.67
	Nonpriority Creditor's Name c/o Convergent Outsourcing, Inc. P. O. Box 9004	When was the debt incurred?	
-	Renton, WA 98057 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Balance on Account	
2	Consolidated Pathology Consultants	Last 4 digits of account number	\$736.00
	Nonpriority Creditor's Name 75 Remittance Drive, Dept. 1895 Chicago, IL 60675-1985	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Balance on Accounts	
3	Discount Tire	Last 4 digits of account number 9488	\$100.00
	Nonpriority Creditor's Name 2125 North IL Route 83 Round Lake Beach, IL 60073	When was the debt incurred?	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Balance on Account	

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	1 Tommy A. Price 2 Tammy L. Price		Case number (if know)	
4.1 4	Infectious Disease Consultants, Ltd	Last 4 digits of account number	7003	\$2,220.00
	Nonpriority Creditor's Name 2740 West Foster Avenue Suite 401 Chicago, IL 60625-3591	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	Ç	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Balance on	Account	
4.1 5	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number	4025	\$1,178.00
	Kohls Credit P. O. Box 3120	When was the debt incurred?		
	Milwaukee, WI 53201 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Balance on	Account	
4.1	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number	0386	\$1,083.00
	Kohls Credit P. O. Box 3120 Milwaukee, WI 53201	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	•	
	☐ Yes	Other. Specify Balance on	Account	

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Debtor 2	1 Tommy A. Price 2 Tammy L. Price		Case number (if know)	
4.1	Lincoln Automotive Financial	Last 4 digits of account number	1690	\$11.00
	Nonpriority Creditor's Name Attn: Bankruptcy P. O. Box 542000 Omaha, NE 68154	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Balance on	Account	
	Mercy Health System	Last 4 digits of account number	1228	\$681.21
	Nonpriority Creditor's Name 100 Mineral Point Avenue Janesville, WI 53548	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Balance on	Account	
٠	Murphy Ambulance	Last 4 digits of account number	1788	\$2,582.00
	Nonpriority Creditor's Name P. O. Box 6990 Libertyville, IL 60048-6990	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Balance on	Account	

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	1 Tommy A. Price 2 Tammy L. Price	Case number (if know)	
4.2	North Suburban Center Oral & Facial	Last 4 digits of account number 8098	\$2,996.00
	Nonpriority Creditor's Name 1240 Meadow Road, #300 Northbrook, IL 60062-3679	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Balance on Account	
4.2	Northshore Medical Group	Last 4 digits of account number	\$15,000.00
	Nonpriority Creditor's Name Dr. Oshin 915 South Waukegan Road, #200 Lake Forest, IL 60045	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Balance on Account	
4.2	Northwestern Lake Forest Hospital Nonpriority Creditor's Name	Last 4 digits of account number	\$90,847.00
	600 North Westmoreland Road Lake Forest, IL 60045	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Balance on Accounts	

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	1 Tommy A. Price 2 Tammy L. Price	Case number (if know)	
4.2	Synchrony Bank	Last 4 digits of account number 6673	\$2,025.00
	Nonpriority Creditor's Name c/o Cavalry Portfolio Services 500 Summit Lake, #400 Valhalla, NY 10595	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Balance on Account	
4.2	Synchrony Bank	Last 4 digits of account number 0505	\$903.00
	Nonpriority Creditor's Name c/o Portfolio Recovery P. O. Box 41021	When was the debt incurred?	
	Norfolk, VA 23541		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Balance on Account	
4.2 5	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number 7135	\$801.00
	c/o Midland Funding 2365 Northside Drive, #300 San Diego, CA 92108	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Balance on Account	

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	Tommy A. Price Tammy L. Price		Case number (if know)	
4.2	Synchrony Bank / Lowes	Last 4 digits of account number	8602	\$1,592.00
	Nonpriority Creditor's Name c/o Portfolio Recovery P. O. Box 41021 Norfolk, VA 23541	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No □ Yes	Other. Specify Balance on	,	
4.2	Synchrony Bank/JC Penney	Last 4 digits of account number	1266	\$3,410.00
	Nonpriority Creditor's Name c/o Portfolio Recovery P. O. Box 41021	When was the debt incurred?		
	Norfolk, VA 23541 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debts	
	☐ Yes	Other. Specify Balance on		
4.2	Synchrony Bank/Old Navy	Last 4 digits of account number	6656	\$3,273.00
	Nonpriority Creditor's Name c/o Portfolio Recovery P. O. Box 41021 Norfolk, VA 23541	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plans, and other similar debts	
	■ No □ Yes	Other. Specify Balance on	•	
	_ 100	- Other, Specify		

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	Tommy A. Price Tammy L. Price	Case number (if know)	
4.2	Synchrony Bank/Walmart	Last 4 digits of account number 1536	\$4,179.00
	Nonpriority Creditor's Name c/o Portfolio Recovery P. O. Box 41021 Norfolk, VA 23541	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Balance on Account	
4.3	Synchrony Bank/Walmart	Last 4 digits of account number 5044	\$1,847.00
	Nonpriority Creditor's Name c/o Portfolio Recovery P. O. Box 41021	When was the debt incurred?	
	Norfolk, VA 23541 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify Balance on Account	
4.3	Target Nonpriority Creditor's Name	Last 4 digits of account number 4193	\$1,906.00
	Target Card Services Mail Stop NCB-0461 Minneapolis, MN 55440	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Balance on Account	

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	Tammy L. Price	Case number (if know)		
4.3			**	
2	Target Nonpriority Creditor's Name Target Card Services Mail Stop NCB-0461	Last 4 digits of account number 0801 When was the debt incurred?	\$1,251.00	
-	Minneapolis, MN 55440 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Balance on Account		
4.3	Village of Round Lake Police Dept. Nonpriority Creditor's Name	Last 4 digits of account number 2008	\$100.00	
	c/o Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105	When was the debt incurred?		
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Balance on Account		
4.3	Walmart	Last 4 digits of account number 7877	\$100.00	
	Nonpriority Creditor's Name 2680 North IL Route 83	When was the debt incurred?		
-	Round Lake Beach, IL 60073 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	The or the date year me, and channel of look all that apply		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Balance on Account		

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Tommy A. Price Debtor 2 Tammy L. Price		Case number (if know)
		e additional creditors here. If you do not have additional persons to be
Name and Address	On which entry in Part 1 or Part 2 or	
Central Credit Services LLC	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
9550 Regency Square Boulevard Suite 500A		Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonville, FL 32225		
,	Last 4 digits of account number	4042
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Certified Services, Inc.	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
1300 North Skokie Highway, #103A Gurnee, IL 60031		Part 2: Creditors with Nonpriority Unsecured Claims
Guillee, IL 00031	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Credit Collection Services	Line 4.15 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
P. O. Box 96		■ Part 2: Creditors with Nonpriority Unsecured Claims
Norwood, MA 02062-0096	Last 4 digits of account number	8345
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Credit Collection Services	Line 4.16 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
P. O. Box 96 Norwood, MA 02062-0096		■ Part 2: Creditors with Nonpriority Unsecured Claims
Norwood, MA 02062-0096	Last 4 digits of account number	8545
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Financial Recovery Services	Line 4.32 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
P. O. Box 385908		■ Part 2: Creditors with Nonpriority Unsecured Claims
Minneapolis, MN 55438-5908	Last 4 digits of account number	G121
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Keynote Consulting, Inc.	Line 4.20 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
220 West Campus Drive, #102		■ Part 2: Creditors with Nonpriority Unsecured Claims
Arlington Heights, IL 60004	Last 4 digits of account number	1374
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
MRS Associates of New Jersey	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
1930 Olney Avenue		■ Part 2: Creditors with Nonpriority Unsecured Claims
Cherry Hill, NJ 08003	Last 4 digits of account number	4467
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Qualia Collection Services	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
P. O. Box 4699		■ Part 2: Creditors with Nonpriority Unsecured Claims
Petaluma, CA 94955	Last 4 digits of account number	8145
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Qualia Collection Services	Line 4.16 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
P. O. Box 4699		■ Part 2: Creditors with Nonpriority Unsecured Claims
Petaluma, CA 94955	Last 4 digits of account number	8622
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Sentry Credit, Inc.	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
2809 Grand Avenue		■ Part 2: Creditors with Nonpriority Unsecured Claims
Everett, WA 98201	Last 4 digits of account number	1047
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Shindler & Joyce	Line <u>4.30</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
Attorneys at Law 1990 East Algonquin Road, #180		■ Part 2: Creditors with Nonpriority Unsecured Claims
1990 Last Algoriquili Noau, #100		

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Schaum	burg, IL 60173		
Debtor 2	Tammy L. Price	Case number (if know)	
Debtor 1	Tommy A. Price	9	

5079

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ ——	0.00
	04.	Caronina di caroni priority di loccarda sidirilo.	ou.	Ψ	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6~	\$	0.00
	6h.	you did not report as priority claims	6g. 6h.	· —	
		3, a s, a s a s a s a s a s a s a s a s a		\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	179,131.39
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	179,131.39

Last 4 digits of account number

			111 FAUE 34 01 00	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tommy A. Price			
	First Name	Middle Name	Last Name	
Debtor 2	Tammy L. Price			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code State what the contract or lease is for

2.1 Lincoln Automotive Financial Attn: Bankruptcy P. O. Box 542000

Omaha, NE 68154

Automobile Lease 2018 Ford Escape

		Docume	ent Page 35 d	of 60	
Fill in this	information to identify your	case:			
Debtor 1	Tommy A Brico				
Debior 1	Tommy A. Price First Name	Middle Name	Last Name		
Debtor 2	Tammy L. Price				
(Spouse if, filin		Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
0 1					
Case numb	per			☐ Chec	k if this is an
,					nded filing
Codebtors people are fill it out, an your name 1. Do y No Yes 2. With Arizona	filing together, both are equ nd number the entries in the and case number (if known) you have any codebtors? (If	re also liable for any deb ally responsible for supp boxes on the left. Attach . Answer every question you are filing a joint case,	olying correct information the Additional Page of the Additional Pag	y? (Community property states and territ	e Additional Page, nal Pages, write
3. In Colu in line Form out Co	2 again as a codebtor only i 106D), Schedule E/F (Official Dlumn 2.	ors. Do not include your f that person is a guaran	spouse as a codebtor	if your spouse is filing with you. List sure you have listed the creditor on S 6G). Use Schedule D, Schedule E/F, o	chedule D (Official r Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The creditor to whom y Check all schedules that apply:	ou owe the debt
3.1				☐ Schedule D. line	
	Name			Schedule E/F, line	
				Schedule G, line	-
-					
	Number Street City	State	ZIP Code		
	Oity	State	ZIF Code		
3.2				☐ Schedule D, line	
	Name			Schedule E/F, line	
				Schedule G, line	-
_				— Ochedule O, lifle	
	Number Street	Stato	ZID Codo		
(City	State	ZIP Code		

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SIII	in this information to identify you	ur caco:							
	btor 1 Tommy A								
	btor 2 Tammy L	Price			-				
Uni	ited States Bankruptcy Court for	the: NORTHERN DISTRIC	CT OF II	LINOIS					
Case number(If known)			-			Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:			
0	fficial Form 106I					MM / DD/ Y		lowing date.	
	chedule I: Your Ir	ncome				IVIIVI / DD/ I	111	12/1	
sup spo atta	as complete and accurate as possible plying correct information. If youse. If you are separated and ich a separate sheet to this for the place of th	you are married and not fili your spouse is not filing w m. On the top of any additi	ng joint ith you,	ly, and your spouse is do not include inform	living ation a	with you, inclu bout your spo	ide inform use. If mo	ation about your re space is needed,	
1.	Fill in your employment information.		Debte	or 1		Debtor 2 or non-filing spouse			
	If you have more than one job	, Employment status	■ Employed			■ Emplo	■ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed			
	employers.	Occupation	Driver			Secretary			
	Include part-time, seasonal, o self-employed work.	r Employer's name	USA Fire Protection			Libertyville Podiatry			
	Occupation may include stude or homemaker, if it applies.	ent Employer's address	Lake	Forest, IL 60045		Liberty	/ille, IL 60	0048	
		How long employed t	here? 2 months		15 years				
Pai	rt 2: Give Details About	Monthly Income							
	imate monthly income as of thuse unless you are separated.	e date you file this form. If	you hav	e nothing to report for a	ny line,	write \$0 in the	space. Incl	ude your non-filing	
	ou or your non-filing spouse have e space, attach a separate shee		ombine t	the information for all en	nployers	s for that perso	n on the lin	es below. If you need	
					Foi	Debtor 1	For Deb non-filin	tor 2 or ng spouse	
2.	List monthly gross wages, s deductions). If not paid month				\$	3,500.00	\$	3,163.33	

3.

1,720.00

5,220.00

+\$

0.00

3,163.33

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

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	otor 1 otor 2	Tommy A. Price Tammy L. Price	_	C	Case	number (if known)	_			
	Cor	av line 4 hore	4.		For \$	Debtor 1		For Debtor	pouse	
	Cop	by line 4 here	4.		Φ_	5,220.00	4	٥,	163.33	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	1,000.00	9	1 ,	170.00	
	5b.	Mandatory contributions for retirement plans	5b	٠.	\$_	0.00	\$	§	0.00	-
	5c.	Voluntary contributions for retirement plans	5c.		\$_	150.00	,	\$	0.00	_
	5d.	Required repayments of retirement fund loans	5d		\$_	0.00	9	\$	0.00	_
	5e.	Insurance	5e		\$_	362.00	\$	Ď	0.00	_
	5f.	Domestic support obligations	5f.		\$_	0.00	9	*	0.00	_
	5g. 5h.	Union dues Other deductions. Specify:	5g 5h		\$_ \$	0.00	\$ + \$	·	0.00	_
•		· · ·	_		· —	0.00		·	0.00	-
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _	1,512.00	,		170.00	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	3,708.00	9	\$1 <u>,</u>	993.33	=
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	O.L.	monthly net income.	8a		\$_	0.00		\$	0.00	=
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8b : 8c.		\$_ \$	0.00	4	\$	0.00	_
	8d.	Unemployment compensation	8d		\$_	0.00		\$	0.00	_
	8e.	Social Security	8e	٠.	<u> </u>	0.00		\$	0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_	0.00	9	\$	0.00	_
	8g.	Pension or retirement income	8g		\$_	0.00	. (Ď	0.00	_
	8h.	Other monthly income. Specify:	8h	1.+	\$_	0.00	+ 1	>	0.00	-
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	0.00	4	\$	0.0	0
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,708.00 + \$		1,993.33	- \$	5,701.33
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		3,700.00 · \$		1,333.33	- [•] -	3,701.33
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe			•				0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies							\$	
13.	Do :	you expect an increase or decrease within the year after you file this form No.	1?						monthl	y income
		Yes. Explain:								

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Fill	in this informa	tion to identify yo	our case:			1				
	otor 1					Ch	ack if	this is:		
DCD	701 1	Tommy A. Pi	rice					amended filing		
	otor 2	Tammy L. Pr	ice						ving postpetition chapter the following date:	
(Spo	ouse, if filing)						13	expenses as or	the following date.	
Unit	ted States Bankı	ruptcy Court for the:	NORTH	IERN DISTRICT OF ILLIN	IOIS		MM	I / DD / YYYY		
	se number nown)									
Of	fficial Fo	rm 106J								
So	chedule	J: Your I	Exper	ses					12 <i>/</i> ·	1
Be info nur	as complete ormation. If member (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta y questio	If two married people a ch another sheet to this	re filing together, be form. On the top of	oth are ed f any addi	qually itional	responsible fo pages, write y	or supplying correct your name and case	_
Par 1.	t 1: Descr Is this a joir	ibe Your House	hold							_
	□ No. Go to									
	_	s Debtor 2 live i	in a separ	ate household?						
	■ N	0	-							
	ΠY	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor 2	2.		
2.	Do you have	e dependents?	□ No							
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?	
	Do not state dependents				Daughter			17	□ No ■ Yes	
					Son			22	□ No	
					3011				■ Yes □ No	
									☐ Yes	
									□ No	
3.	Do vour ext	enses include	_	NI-					☐ Yes	
0.	expenses o	f people other tl	^{han} ┌┐	No Yes						
	yourself and	d your depende	nts? —	100						
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		h assistance and		government assistance is luded it on <i>Schedule I:</i>				Your exp	enses	
-		,								
4.		or home owners and any rent for the		ses for your residence. I r lot.	Include first mortgage	e 4.	\$_		1,227.69	
	If not include	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
	•	rty, homeowner's				4b.			0.00	
		maintenance, re owner's associat		upkeep expenses dominium dues		4c. 4d.			<u>200.00</u> 218.00	
5.				our residence, such as ho	ome equity loans		\$ -		0.00	

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Tammy L. Price	Case number (if know	wn)
lities:		
······································	6a. \$	173.00
· · · · · · · · · · · · · · · · · · ·	6b. \$	84.00
Telephone, cell phone, Internet, satellite, and cable services	6c. \$	500.00
Other. Specify:	6d. \$	0.00
	7. \$	700.00
. •	8. \$	0.00
thing, laundry, and dry cleaning	9. \$	100.00
sonal care products and services	10. \$	60.00
dical and dental expenses	11. \$	30.00
nsportation. Include gas, maintenance, bus or train fare.		450.00
	·	450.00
		200.00
aritable contributions and religious donations	14. \$	0.00
	45- ¢	0.00
	· —	0.00
	·	0.00
	· —	458.00
· · · · · · · · · · · · · · · · · · ·	150. \$	0.00
	16 \$	0.00
<u> </u>	ιο. ψ	0.00
	17a. \$	560.00
• •	· —	469.00
• •	· —	237.00
		0.00
	· ·	
		0.00
	\$	0.00
·	19.	_
		0.00
	·	0.00
•	· —	0.00
	· · · · · · · · · · · · · · · · · · ·	0.00
	·	0.00
ner: Specify:	21+\$	0.00
culate your monthly expenses		
	\$	5,666.69
		5,666.69
Add iiilo 22a and 22b. The result is your monthly expenses.	Ψ	5,000.09
,	23a. \$	5,701.33
c. Copy your monthly expenses from line 22c above.	23b\$	5,666.69
	230 \$	34.64
i ne resuit is your <i>montniy net income</i> .	200. Ψ	0-1.04
VOIL expect an increase or decrease in your expenses within the year after	vou file this form?	
		increase or decrease because of a
	3 3 1 1 7	
No.		
Yes. Explain here:		
	ities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies Idicare and children's education costs thing, laundry, and dry cleaning sonal care products and services dical and dental expenses insportation. Include gas, maintenance, bus or train fare, not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations urance. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Under insurance. Other insurance. Other insurance. Other insurance. Other insurance. Other insurance syecify: tes. Do not include taxes deducted from your pay or included in lines 4 or 20. Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Car payments for Vehicle 2 Other. Specify: Car payments of alimony, maintenance, and support that you did not report uncted from your pay on line 5, Schedule 1, Your Income (Official Form 106 ter payments you make to support others who do not live with you. Secify: Let real property expenses not included in lines 4 or 5 of this form or on Secify: Let real property expenses not included in lines 4 or 5 of this form or on Secify: Let real property expenses not included in lines 4 or 5 of this form or on Secify: Let real property expenses not included in lines 4 or 5 of this form or on Secify: Let real property expenses for expenses Let let acks Let l	Ities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: da and housekeeping supplies Idicare and children's education costs thing, laundry, and dry cleaning sonal care products and services dical and dental expenses not include car payments. Include car payments. Include car payments. It is sinsportation. Include gas, maintenance, bus or train fare. Include car payments. It is is include insurance deducted from your pay or included in lines 4 or 20. It is insurance. It is clude insurance deducted from your pay or included in lines 4 or 20. It is insurance. It is clude insurance deducted from your pay or included in lines 4 or 20. It is insurance. It is clude insurance deducted from your pay or included in lines 4 or 20. It is insurance. It is clude insurance specify: It is is is is is included to the payments for Vehicle 1 It is car payments for Vehicle 1 It is car payments for Vehicle 2 It is car payments for Vehicle 2 It is car payments for Vehicle 2 It is car payments for Vehicle 3 It is car payments for Vehicle 2 It is control in the payments of alimony, maintenance, and support that you did not report as facted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). It is control in the payments of alimony, maintenance, and support that you did not report as facted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). It is cluded from your pay on line 5, Schedule 1, Your Income (Official Form 106i). It is cluded from your pay on line 5, Schedule 1, Your Income (Official Form 106i). It is cluded from your pay on line 5, Schedule 1, Your Income (Official Form 106i). It is cluded from your pay on line 5, Schedule 1, Your Income (Official Form 106i). It is cluded from your pay on line 5, Schedule 1, Your Income (Official Form 106i). It is cluded your monthly expenses for Debtor 2), if any, from Official Form 106J-2 It is cluded your monthly expenses from your can loan within the year o

Fill in this inf	ormation to identify your	case:		
Debtor 1	Tommy A. Price			
	First Name	Middle Name	Last Name	
Debtor 2	Tammy L. Price			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	NORTHERN DISTRIC	Γ OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
If two married You must file tobtaining mor	people are filing together	, both are equally responses bankruptcy schedulen connection with a ban		
s	ign Below			
Did you	pay or agree to pay some	one who is NOT an atto	rney to help you fill out bankru	ptcy forms?
■ No				
☐ Yes	s. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	enalty of perjury, I declare are true and correct.	that I have read the sun	nmary and schedules filed with	this declaration and
X /e/ T	ommy A. Price		X /s/ Tammy L. Pr	ice
	my A. Price		Tammy L. Price	
	ature of Debtor 1		Signature of Debto	
Date	September 18, 2018		Date Septemb	er 18, 2018

Fill	in this inforr	mation to identify you	r case:			
Del	otor 1	Tommy A. Price First Name	Middle Name	Last Name		
Del	otor 2	Tammy L. Price				
(Spc	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Cas	se number					
(if kr	nown)					☐ Check if this is an amended filing
Of	ficial Fo	rm 107				
Sta	atement	of Financial	Affairs for Indivi	duals Filing fo	or Bankruptcy	4/16
info num	rmation. If m	nore space is needed, n). Answer every que	attach a separate sheet to	this form. On the top	th are equally responsible for of any additional pages, write	
1.	What is you	r current marital statu	us?			
	■ Married					
	- Not ma	med				
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you I	ived in the last 3 years. Do r	not include where you liv	ve now.	
	Debtor 1 Pr	rior Address:	Dates Debtor 1 lived there	Debtor 2 Pri	ior Address:	Dates Debtor 2 lived there
3. state					mmunity property state or terr erto Rico, Texas, Washington a	
	■ No					
	_	ake sure you fill out Sch	nedule H: Your Codebtors (C	Official Form 106H).		
		•	`	,		
Par	t 2 Expla	in the Sources of You	r Income			
4.	Fill in the total	al amount of income yo	nployment or from operation ureceived from all jobs and have income that you receive	all businesses, including		calendar years?
	□ No					
		I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions a exclusions)	Sources of income and Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$38,490	Wages, commission bonuses, tips	\$33,909.00
			☐ Operating a business		☐ Operating a busines	i s

Official Form 107

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Tommy A. Price Debtor 1 Debtor 2 Tammy L. Price Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$53,000.00 \$51,000.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$47,000.00 \$51,000.00 For the calendar year before that: Wages, commissions. Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... paid still owe Current monthly mortgage, car and \$0.00 \$0.00 ☐ Mortgage credit card payments. ☐ Car ☐ Credit Card

□ Loan Repayment□ Suppliers or vendors

□ Other

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Tommy A. Price

Deb	otor 2	Tammy L. Price		Cas	se number (if known)		
7.	Inside of wh	in 1 year before you filed for bankrupiers include your relatives; any general pich you are an officer, director, person ir iness you operate as a sole proprietor.	artners; relatives of any gen n control, or owner of 20% o	eral partners; partners of their voting	erships of which yog g securities; and a	ou are a general ny managing ag	partner; corporation ent, including one fo
	_	No Yes. List all payments to an insider.					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
В.	insid	in 1 year before you filed for bankrupt er? de payments on debts guaranteed or co		ments or transfer a	any property on a	eccount of a de	bt that benefited an
		No					
	_	Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment or's name
Par	t 4:	Identify Legal Actions, Repossessio	ns and Foreclosures				
9.	List a modif	in 1 year before you filed for bankrupt Il such matters, including personal injury fications, and contract disputes.					
		Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of the	case
	Cav Tam	ralry SPV I, LLC v. nmy Price SC 5079	Small Claims Proceedings	Circuit Court o County, Illinois Waukegan, IL	5	■ Pending □ On appea □ Conclude	
						Judgment Deduction	Entered/Wage Pending
10.	Chec	in 1 year before you filed for bankrupt k all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached	seized, or levied?
	Cred	ditor Name and Address	Describe the Property Explain what happened		Date		Value of the property
	c/o 199	ralry SPV I, LLC Shindler & Joyce 0 East Algonquin Road, #180 raumburg, IL 60173	Wage Deductions ☐ Property was reposse ☐ Property was foreclos ☐ Property was garnishe ☐ Property was attached	essed. ed. ed.			\$0.00
11.	acco	in 90 days before you filed for bankru unts or refuse to make a payment bed No Yes. Fill in the details. ditor Name and Address	ptcy, did any creditor, inc	luding a bank or fii		n, set off any ar	nounts from your Amount
					takeı	1	

Case 18-26251 Doc 1 Filed 09/18/18 Entered 09/18/18 14:54:49 Desc Main Page 44 of 60 Document Debtor 1 Tommy A. Price Debtor 2 Tammy L. Price Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. п Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of payment **Address** transferred or transfer was Email or website address made Person Who Made the Payment, if Not You \$2,000.00 Magee Hartman, P.C. **Attorney Fees**

444 North Cedar Lake Road Round Lake, IL 60073 bk@mageehartman.com Case 18-26251 Doc 1 Filed 09/18/18 Entered 09/18/18 14:54:49 Desc Main Document Page 45 of 60

Debtor 1 Tommy A. Price Debtor 2 Tammy L. Price

Case number (if known)

17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditors. Do not include any payment or transfer that you	s or to make payments			or transfer any prope	rty to anyone who
	No Silling the Annual Control of the					
	Yes. Fill in the details.				_	
	Person Who Was Paid Address	Description and v transferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankruptc transferred in the ordinary course of your bu			sfer any prop	perty to anyone, othe	r than property
	Include both outright transfers and transfers mad include gifts and transfers that you have already No			ecurity interes	st or mortgage on your	property). Do not
	Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		Describe any property or payments received or debts	
	Person's relationship to you			paid in ex	cnange	
	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot		y property to a se	elf-settled tr	ust or similar device	of which you are a
	■ No □ Yes. Fill in the details.					
	Name of trust	Description and v	alue of the prope	rty transferr	red	Date Transfer was made
Par	8: List of Certain Financial Accounts, Inst	truments, Safe Deposit	Boxes, and Stor	age Units		
	Within 1 year before you filed for bankruptcy sold, moved, or transferred?	•				, ,
	Include checking, savings, money market, or houses, pension funds, cooperatives, associ No			f deposit; sh	nares in banks, credit	unions, brokerage
	Yes. Fill in the details.					
		Last 4 digits of account number	Type of account instrument	clo	ite account was osed, sold, oved, or insferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yo	ear before you filed for	bankruptcy, any	safe deposi	t box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution	Who else had acc	ees to it?	escribe the	contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	Address (Number, S State and ZIP Code)		escribe trie	Contents	have it?
22.	Have you stored property in a storage unit or	r place other than your	home within 1 ye	ear before yo	ou filed for bankrupto	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		escribe the	contents	Do you still have it?
		,				

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Debtor 1 Tommy A. Price Debtor 2 Tammy L. Price

Case number (if known)

Par	t 9: Identify Property You Hold or Control for S	Someone Else				
23.	Do you hold or control any property that someone for someone.	ne else owns? Include any proper	rty yo	ou borrowed from, are storing fo	r, or hold in trust	
	■ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value	
Par	t 10: Give Details About Environmental Informa	ation				
For	the purpose of Part 10, the following definitions	apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground	_	•		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	law,	whether you now own, operate,	or utilize it or used	
	Hazardous material means anything an environr hazardous material, pollutant, contaminant, or s		s was	ste, hazardous substance, toxic	substance,	
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	n the	y occurred.		
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	a und	ler or in violation of an environm	ental law?	
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it				Date of notice	
25.	Have you notified any governmental unit of any	release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ironn	nental law? Include settlements	and orders.	
	■ No					
	Yes. Fill in the details.	_				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case	
Par	t 11: Give Details About Your Business or Con	nections to Any Business				
27.	Within 4 years before you filed for bankruptcy, d	did you own a business or have ar	ny of	the following connections to an	y business?	
	☐ A sole proprietor or self-employed in a to	•	•	J		
	☐ A member of a limited liability company	•		•		
	☐ A partner in a partnership					
	☐ An officer, director, or managing executi	ive of a corporation				
	☐ An owner of at least 5% of the voting or	-				

Case 18-26251 Doc 1 Filed 09/18/18 Entered 09/18/18 14:54:49 Desc Main Document Page 47 of 60 Tommy A. Price Debtor 1 Debtor 2 Tammy L. Price Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Tommy A. Price /s/ Tammy L. Price Tommy A. Price Tammy L. Price Signature of Debtor 1 Signature of Debtor 2 Date September 18, 2018 Date **September 18, 2018** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

☐ Yes. Name of Person

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Fill in this info	rmation to identify your	case:		
Debtor 1	Tommy A. Price			
Debtor 2	First Name	Middle Name	Last Name	_
(Spouse if, filing)	Tammy L. Price First Name	Middle Name	Last Name	—
United States B	Bankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official E	a rea 100			
Official Fo		n for Indiv	viduals Filing Under Ch	apter 7 12/15
			Tudale I IIIIg e IIde	12.10
	dividual filing under cha ve claims secured by yo	-	I out this form if:	
	sed personal property a		ot expired	
You must file th	nis form with the court w	ithin 30 days after	you file your bankruptcy petition or by the e time for cause. You must also send copie	date set for the meeting of creditors, so to the creditors and lessors you list
	people are filing together and date the form.	in a joint case, bo	oth are equally responsible for supplying co	rrect information. Both debtors must
	e and accurate as possib your name and case nur		s needed, attach a separate sheet to this for	m. On the top of any additional pages,
Part 1: List	Your Creditors Who Have	a Secured Claims		
			On the second by D	The state of the s
information k	oelow.		: Creditors Who Have Claims Secured by P	
Identify the c	reditor and the property the	nat is collateral	What do you intend to do with the proper secures a debt?	rty that Did you claim the property as exempt on Schedule C?
Creditor's	Fifth Third Bank		☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	_
Description of	of 672 South Roseha	II Lane Round	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	Lake, IL 60073 Lal	ke County	Retain the property and [explain]:	
securing deb	vt:		Retain - Keep Current	
Creditor's	Lincoln Automotive F	inancial	☐ Surrender the property.	□ No
name:	Lincom Adiomotivo	manolai	☐ Retain the property and redeem it.	
Description of	of 2013 Ford Fusion 8	85 000 miles	Retain the property and enter into a	■ Yes
property	2013 FOR TUSION	33,000 IIIIes	Reaffirmation Agreement. Retain the property and [explain]:	
securing deb	t:		— reading the property and [oxplain].	
Creditor's	Lincoln Automotive F	inancial	□ Surrondor the property	□ No
name:	Lincom Automotive F	mancial	☐ Surrender the property.☐ Retain the property and redeem it.	□ NO
Description	of 2015 Ford Fiesta 6	5 000 miles	Retain the property and enter into a	■ Yes
property	~ ZUIJ FUIU FIESIA 0	5,500 miles	Reaffirmation Agreement. Retain the property and [explain]:	

Official Form 108

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Debtor 1 Debtor 2 Tommy A. Price Tammy L. Price	Case number (if known)
securing debt:	
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you liste in the information below. Do not list real estate leases. U You may assume an unexpired personal property lease	ed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fit Unexpired leases are leases that are still in effect; the lease period has not yet ended.
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased Property:	□ No
Troperty.	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated i property that is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal
X /s/ Tommy A. Price	χ /s/ Tammy L. Price
Tommy A. Price	Tammy L. Price Signature of Debtor 2
Signature of Debtor 1	Signature of Debtor 2

Date

Date

September 18, 2018

September 18, 2018

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-26251 Doc 1 Filed 09/18/18 Entered 09/18/18 14:54:49 Desc Main Document Page 54 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Tommy A. Price Tammy L. Price		Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR DE	CBTOR(S)		
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	2,000.00		
	Prior to the filing of this statement I have received			1,599.00		
	Balance Due		\$	401.00		
2.	\$_335.00 of the filing fee has been paid.					
3.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
4.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
5.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are mem	pers and associates of my law	v firm.	
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				ı. A	
6.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspec	ets of the bankruptcy of	ase, including:		
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Services under c, above, will be provide pose-petition services, also including neand filing of reaffirmation agreements at thereof. 	ement of affairs and plan which ors and confirmation hearing, a d upon confirmation of wi egotiations with secured of	h may be required; and any adjourned hea ritten post-petition creditors to reduce	rings thereof; fee agreement for to market value; prepar		
7.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			es, relief from stay action	ns or	
		CERTIFICATION				
	I certify that the foregoing is a complete statement of any pankruptcy proceeding.	y agreement or arrangement fo	r payment to me for r	epresentation of the debtor(s)) in	
s	September 18, 2018	/s/ James T. Mag	jee			
\overline{D}	Date	James T. Magee				
		Signature of Attorn Magee Hartman,				
		444 North Cedar				
		Round Lake, IL 6 (847) 546-0055	50073 Fax: (847) 546-839(
		bk@mageehartn				
		Name of law firm				

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United States Bankruptcy Court Northern District of Illinois

In re	Tommy A. Price Tammy L. Price		Case No.	
		Debtor(s)	Chapter 7	7
	VI	ERIFICATION OF CREDITOR N	MATRIX	
		Number o	f Creditors:	42
	The above-named Debtor(s (our) knowledge.) hereby verifies that the list of cred	itors is true and co	errect to the best of my
Date:	September 18, 2018	/s/ Tommy A. Price Tommy A. Price		
Date:	September 18, 2018	Signature of Debtor /s/ Tammy L. Price Tammy L. Price Signature of Debtor		

ACL, Inc. c/o Falls Collection Service, Inc. N114 W19225 Clinton Drive Germantown, WI 53022

Anesthesia Consultants, Ltd. 34121 Eagle Way Chicago, IL 60678-1341

Ashley Home Store 551 North Milwaukee Avenue Vernon Hills, IL 60061

Capital One Attn: Bankruptcy P. O. Box 30285 Salt Lake City, UT 84130

Capital One Bank USA, N.A. c/o Portfolio Recovery P.O. Box 41021 Norfolk, VA 23541

Central Credit Services LLC 9550 Regency Square Boulevard Suite 500A Jacksonville, FL 32225

Certified Services, Inc. 1300 North Skokie Highway, #103A Gurnee, IL 60031

Chase Card Services Correspondence Department P. O. Box 15298 Wilmington, DE 19850

Citibank/Distressed Asset Portfolio c/o Unifund CCR, LLC 10625 Techwoods Circle Cincinnati, OH 45242

Citizens Bank Attention: ROP-15B 1 Citizens Drive Riverside, RI 02940 Comenity Capital Bank/Bill Me Later c/o Simm Associates, Inc. 800 Pencader Drive Newark, DE 19702

Comm Cons School Dist. 46 Registrar c/o Convergent Outsourcing, Inc. P. O. Box 9004 Renton, WA 98057

Consolidated Pathology Consultants 75 Remittance Drive, Dept. 1895 Chicago, IL 60675-1985

Credit Collection Services P. O. Box 96 Norwood, MA 02062-0096

Discount Tire 2125 North IL Route 83 Round Lake Beach, IL 60073

Fifth Third Bank Bankruptcy Department Maildrop RSCB3E/1830 E Paris Ave SE Grand Rapids, MI 49546

Financial Recovery Services P. O. Box 385908 Minneapolis, MN 55438-5908

Ford Credit P. O. Box 790093 Saint Louis, MO 63179-0093

Infectious Disease Consultants, Ltd 2740 West Foster Avenue Suite 401 Chicago, IL 60625-3591

Keynote Consulting, Inc. 220 West Campus Drive, #102 Arlington Heights, IL 60004 Kohls/Capital One Kohls Credit P. O. Box 3120 Milwaukee, WI 53201

Lincoln Automotive Financial Attn: Bankruptcy P. O. Box 542000 Omaha, NE 68154

Lincoln Automotive Financial Attn: Bankruptcy P. O. Box 542000 Omaha, NE 68154

Mercy Health System 100 Mineral Point Avenue Janesville, WI 53548

MRS Associates of New Jersey 1930 Olney Avenue Cherry Hill, NJ 08003

Murphy Ambulance P. O. Box 6990 Libertyville, IL 60048-6990

North Suburban Center Oral & Facial 1240 Meadow Road, #300 Northbrook, IL 60062-3679

Northshore Medical Group Dr. Oshin 915 South Waukegan Road, #200 Lake Forest, IL 60045

Northwestern Lake Forest Hospital 600 North Westmoreland Road Lake Forest, IL 60045

Qualia Collection Services P. O. Box 4699 Petaluma, CA 94955

Sentry Credit, Inc. 2809 Grand Avenue Everett, WA 98201

Shindler & Joyce Attorneys at Law 1990 East Algonquin Road, #180 Schaumburg, IL 60173

Synchrony Bank c/o Cavalry Portfolio Services 500 Summit Lake, #400 Valhalla, NY 10595

Synchrony Bank c/o Portfolio Recovery P. O. Box 41021 Norfolk, VA 23541

Synchrony Bank c/o Midland Funding 2365 Northside Drive, #300 San Diego, CA 92108

Synchrony Bank / Lowes c/o Portfolio Recovery P. O. Box 41021 Norfolk, VA 23541

Synchrony Bank/JC Penney c/o Portfolio Recovery P. O. Box 41021 Norfolk, VA 23541

Synchrony Bank/Old Navy c/o Portfolio Recovery P. O. Box 41021 Norfolk, VA 23541

Synchrony Bank/Walmart c/o Portfolio Recovery P. O. Box 41021 Norfolk, VA 23541 Target Card Services Mail Stop NCB-0461 Minneapolis, MN 55440

Village of Round Lake Police Dept. c/o Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105

Walmart 2680 North IL Route 83 Round Lake Beach, IL 60073